#### **Out-Of-State Travel Waiver Justification**

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This waiver justification is to be completed for every out-of-state trip requested between March 7 and June 30, 2011.

If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

Number of People on Trip: 1	
Name of Person Attending: George A. Carroll	Working Title: Assistant Attorney General
Department: Attorney General's Office	Division/Bureau/Section: Regents Division
Will this trip require an overnight stay outside of Iowa? No: ☐ Yes: ⊠	(If No, you do not need this waiver)
City (Cities) Traveling To: St. Louis, Missouri	Dates of Travel: 6/15 - 6/16/2011
Funding Source: Appropriated State:%  Federal:%  (If the appropriated state funds is 0% - y	Other:% If Other, Specify: ou do not need this waiver)
Total Projected Cost of Trip (Include Transportation, Mileage, Lodging, Meals	, Registration, Parking, etc): \$630.00
Does this Trip Require Executive Council Approval for Conference/Convention	on? No: ⊠ Yes: □
If Yes, Have You Received Approval? No: Yes: If Yes, Date: Reason for Travel Waiver (Select one)	
Fulfills statutorily required duties (Cite the specific statute)	
Has potential to bring cost savings or enhanced revenues to the state (C program that will receive the cost savings or enhanced revenues and prof the saving or revenues attributable to the travel)	Cite the specific ovide an estimate
Has a benefit or potential benefit which significantly outweighs the potential the current Executive Council Fact Sheet for qualifying criteria and provinformation on the lines below.	ntial cost. See ide that
Oral Argument before 8th Circuit Court of Appeals Case 10-2588; Teresa Wagner	v. Carolyn Jones
Department Director Signature Summer. Dtable  This form must be signed by a department head or agency director.	Date: 8   Z 3   I

#### Additional information to assist you in completing this form. See Fact Sheet for more complete information.

- This waiver is required by HF45 from March 7 until June 30, 2011.
- If no overnight stay is required at a location out-of-state, the travel is considered incidental and no waiver form needs to be submitted.
- The Council meets each Monday at 10:00 a.m. Deadline for waiver is the previous Thursday at 12:00 noon.
- If your travel requires both Executive Council approval and the waiver justification due to a convention/conference, note that both processes must be completed separately. See Fact Sheet for further explanation.

**Executive Council Approval** 

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Executive Council

### **Out-Of-State Travel Waiver Justification**

This waiver justification is to be completed for every out-of-state trip requested between March 7 and June 30, 2011.

If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

Contact E-mail: John.bloome@iub.iowa.gov			
Working Title: Utilities Regulation Inspector			
Division/Bureau/Section: IUB / Safety and Engineering			
Reason for Travel: Pipeline Safety Training – PHMSA required			
Dates of Travel: 06/27/2011 - 06/30/2011			
(If after June 30, 2011 – you DO NOT need this waiver.) 50% Federal/50% revolving funds charged to gas utility companies  Other:% If Other, Specify:			
Registration, Parking, etc): \$946.82			
n? No: X Yes:			
ж			
Cite the specific ovide an estimate of the			
Has a benefit or potential benefit which significantly outweighs the potential cost. See the  Current Executive Council Fact Sheet for qualifying criteria and provide that information on the lines below. (If nonrefundable ticket is the justification, date of purchase is required.)			
egrity Management for natural gas utility companies. The lowa Utilities			
Board is certified by and receives grant funds from the US Department of Transportation under 49 USC Chapter 601 to inspect gas companies for compliance with federal pipeline safety standards. To meet federal inspection expectations and avoid grant penalty the IUB must have sufficient technical staff trained in the new regulations and federal inspection protocols and ready to begin inspections later this year. This class would provide that training.			
Department Director Signature: Date: S-20-1			
Department Director Printed Name: Eugabeth S bcobs			
This form must be signed by a			
department head or agency director. Email a PDF of the form to executivecouncil@iowa.gov Council Approval  APPROVED Executive Council  MAY 3 1 2011			

### **Out-Of-State Travel Waiver Justification**

This waiver justification is to be completed for every out-of-state trip requested between March 7 and June 30, 2011.

If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

Number of People on Trip: 5 (in total)  Name of Person Attending: Don Stursma  Department: Commerce  Will this trip require an overnight stay outside of lowa? No: Yes: X  (If No – you DO NOT need this waiver.)	Working Title: Man Division/Bureau/Secti	.stursma@iub.iowa.gov ager – Safety & Engineering
Department: Commerce  Will this trip require an overnight stay outside of lowa? No: ☐ Yes: X  (If No − you DO NOT need this waiver.)	Division/Bureau/Secti	V
Will this trip require an overnight stay outside of lowa? No: ☐ Yes: X  (If No – you DO NOT need this waiver.)		ion: ILIB / Safety and Engineering
(If No – you DO NOT need this waiver.)	Dance for Trevels D	OII. IOB / Salety and Engineering
2 2 2 3 2 5 5 7 5 7 5 5 7 5 5 7 5 5 7 5 5 7 5 7		ipeline Safety Training – PHMSA required
City (Cities) Traveling To: Denver, Colorado	Dates of Travel: 06/2	27/2011 – 06/30/2011
	Other:% If Other	you DO NOT need this waiver.) 50% Federal/50% revolving funds charged to gas utility companies his waiver.)
Total Projected Cost of Trip (Include Transportation, Mileage, Lodging, Meals	s, Registration, Parking, e	stc): \$946.82
Does this Trip Require Executive Council Approval for Conference/Convention	on? No: X Yes:	
If Yes, Have You Received Approval? No: Yes: HYes, Date	te:	
Reason for Travel Waiver (Select one)		
Fulfills statutorily required duties. (Cite the specific statute.)		
Has potential to bring cost savings or enhanced revenues to the state. ( program that will receive the cost savings or enhanced revenues and pressiving or revenues attributable to the travel.)	(Cite the specific rovide an estimate of the	
Has a benefit or potential benefit which significantly outweighs the pote current Executive Council Fact Sheet for qualifying criteria and provide lines below. (If nonrefundable ticket is the justification, date of purchas	se is required.)	
This course introduces the new federal pineline safety standards for Distribution In	tegrity Management for na	tural gas utility companies. The lowa Utilities
Board is certified by and receives grant funds from the US Department of Transpor with federal pipeline safety standards. To meet federal inspection expectations and the new regulations and federal inspection protocols and ready to begin inspection	rtation under 49 USC Char nd avoid grant penalty the I	oter 601 to inspect gas companies for compliance UB must have sufficient technical staff trained in
Department Director Signature:	Date:	
Department Director Printed Name: 2020PT	2	
<ul> <li>Additional information to assist you in completing this See Fact Sheet for more complete information.</li> <li>This waiver is required by HF45 from March 7 until June 30, 2011.</li> <li>If no overnight stay is required at a location out-of-state, the travel i incidental and no waiver form needs to be submitted.</li> <li>The Council meets each Monday at 10:00 a.m. Deadline for waive Wednesday at 12:00 noon.</li> <li>If your travel requires both Executive Council approval and the wair</li> </ul>	is considered er is the previous	This form must be signed by a department head or agency director. Email a PDF of the form to executivecouncil@iowa.gov Executive Council Approval  APPROVED Executive Council

MAY 3 1 2011

due to a convention/conference, note that both processes must be completed

#### **Out-Of-State Travel Waiver Justification**

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If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

		•	100 W 1922 W	0.121		
Number of People	on Trip:	5 (in total)	Contact E-mail:			APCS - 25
Name of Person A	ttending:	Jeffrey O'Neal	Working Title:	Utilities R		and the same of th
Department: Co	mmerce		Division/Bureau	/Section:	IUB / Sa	fety and Engineering
		ght stay outside of lowa? No: Yes: X	Reason for Trav	el: Pipelin	e Safety 1	Fraining – PHMSA required
City (Cities) Travel	ling To:	Denver, Colorado	Dates of Travel:			
Funding Source:	☐ Appro	priated State: 50% X Federal: 50% X (If the coding for the travel claim is appropriation 0	Other:% If	Other, Sp	ecify:	need this waiver.) 50% Federal/50% revolving funds charged to gas utility companies
Total Projected Co	ost of Trip (I	nclude Transportation, Mileage, Lodging, Meals	, Registration, Park	ing, etc):	\$94	6.82
Does this Trip Rec	quire Execu	tive Council Approval for Conference/Convention	on? No: X	Yes:		
If Yes, Have You R	Received Ap	proval? No: Yes: If Yes, Date	e:			
Reason for Travel	Waiver (Se	lect one)				
Fulfills statutorily required duties. (Cite the specific statute.)						
Has potential to bring cost savings or enhanced revenues to the state. (Cite the specific program that will receive the cost savings or enhanced revenues and provide an estimate of the saving or revenues attributable to the travel.)						
Has a benefit or potential benefit which significantly outweighs the potential cost. See the current Executive Council Fact Sheet for qualifying criteria and provide that information on the lines below. (If nonrefundable ticket is the justification, date of purchase is required.)						
This course introduces the new federal pipeline safety standards for Distribution Integrity Management for natural gas utility companies. The lowa Utilities				companies. The lowa Utilities		
Board is certified by and receives grant funds from the US Department of Transportation under 49 USC Chapter 601 to inspect gas companies for compliance with federal pipeline safety standards. To meet federal inspection expectations and avoid grant penalty the IUB must have sufficient technical staff trained in the new regulations and federal inspection protocols and ready to begin inspections later this year. This class would provide that training.						
Department Director Signature: Department Director Printed Name: Elianbeh 5 0005						
This waiver     If no overning	See Factoried is required that stay is re-	ormation to assist you in completing this act Sheet for more complete information. by HF45 from March 7 until June 30, 2011. equired at a location out-of-state, the travel is form needs to be submitted.			departme Ema xecutivec	orm must be signed by a nt head or agency director. il a PDF of the form to council@jowa.gov Executive Council Approval

- The Council meets each Monday at 10:00 a.m. Deadline for waiver is the previous Wednesday at 12:00 noon.
- If your travel requires both Executive Council approval and the waiver justification due to a convention/conference, note that both processes must be completed separately. See Fact Sheet for further explanation.

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## **Out-Of-State Travel Waiver Justification**

This waiver justification is to be completed for every out-of-state trip requested between March 7 and June 30, 2011.

If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

		Contact Empile mark oh	ill@iub.iowa.gov
Number of People on Trip:	5 (in total)		Regulation Inspector
Name of Person Attending:	Mark Shill		
Department: Commerce			IUB / Safety and Engineering
Will this trip require an overn	ight stay outside of lowa? No: Yes: X	Reason for Travel: Pipel	ine Safety Training – PHMSA required
City (Cities) Traveling To:	Denver, Colorado	_ Dates of Travel: 06/27/2	
	opriated State: $50\%$ X Federal: $50\%$ X O (If the coding for the travel claim is appropriation 00)	ther: % If Other, S	50% Federal/50% revolving funds charged to gas utility companies waiver.)
Total Projected Cost of Trip	Include Transportation, Mileage, Lodging, Meals,	Registration, Parking, etc)	\$946.82
	utive Council Approval for Conference/Convention		
If Yes, Have You Received A	pproval? No: Yes: If Yes, Date:		
Reason for Travel Waiver (Se	elect one)		
☐ Fulfills statutorily requi	red duties. (Cite the specific statute.)		
program that will received saving or revenues attractions.			
X current Executive Coul	ial benefit which significantly outweighs the poter ncil Fact Sheet for qualifying criteria and provide t undable ticket is the justification, date of purchase	is required.)	The Land Hilling
This course introduces the new	w federal pipeline safety standards for Distribution Inte	egrity Management for natura	al gas utility companies. The lowa Utilities
Board is certified by and receive	wes grant funds from the US Department of Transports indards. To meet federal inspection expectations and al inspection protocols and ready to begin inspections	ation under 49 USC Chapter avoid grant penalty the IUB	must have sufficient technical staff trained in
·	SA John Charle	Date: 5-20-11	
Department Director Signate	The shall C so	ahc	
Department Director Printed	Name: Ougusti 2 100	AD 5	
See Fa  This waiver is require  If no overnight stay is incidental and no wait  The Council meets ex Wednesday at 12:00  If your travel requires the to a convention/or	formation to assist you in completing this fact Sheet for more complete information.  d by HF45 from March 7 until June 30, 2011. required at a location out-of-state, the travel is ver form needs to be submitted. ach Monday at 10:00 a.m. Deadline for waiver noon. both Executive Council approval and the waiven conference, note that both processes must be at Sheet for further explanation.	is the previous	This form must be signed by a department head or agency director. Email a PDF of the form to executivecouncil@iowa.gov Executive Council Approval APPROVED Executive Council MAY 3 1 2011
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### **Out-Of-State Travel Waiver Justification**

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If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

Fiease allswell all of the quest	ions nated bolow.		
Number of People on Trip: 5 (in total)	Contact E-mail:   larry.sorensen@iub.iowa.gov		
Name of Person Attending: Larry Sorensen	Working Title: Utilities Regulation Inspector		
Department: Commerce	Division/Bureau/Section: IUB / Safety and Engineering		
Will this trip require an overnight stay outside of lowa? No: ☐ Yes: X  (If No – you DO NOT need this waiver.)	Reason for Travel: Pipeline Safety Training – PHMSA required		
City (Cities) Traveling To: Denver, Colorado	Dates of Travel: 06/27/2011 - 06/30/2011		
Funding Source: Appropriated State: 50% X Federal: 50% X (If the coding for the travel claim is appropriation 00)	(If after June 30, 2011 – you DO NOT need this waiver.) 50% Federal/50% revolving funds charged to gas utility companies  000 - you DO NOT need this waiver.)		
Total Projected Cost of Trip (Include Transportation, Mileage, Lodging, Meals,	Registration, Parking, etc): \$946.82		
Does this Trip Require Executive Council Approval for Conference/Convention			
If Yes, Have You Received Approval? No: Yes: HYes, Date	9:		
Reason for Travel Waiver (Select one)			
Fulfills statutorily required duties. (Cite the specific statute.)			
Has potential to bring cost savings or enhanced revenues to the state. (C program that will receive the cost savings or enhanced revenues and prosaving or revenues attributable to the travel.)	Cite the specific rovide an estimate of the		
Has a benefit or potential benefit which significantly outweighs the potent current Executive Council Fact Sheet for qualifying criteria and provide the lines below. (If nonrefundable ticket is the justification, date of purchases)	that information on the		
This course introduces the new federal pipeline safety standards for Distribution Inte	tegrity Management for natural gas utility companies. The Iowa Utilities		
Board is certified by and receives grant funds from the US Department of Transport with federal pipeline safety standards. To meet federal inspection expectations and the new regulations and federal inspection protocols and ready to begin inspections	d avoid grant penalty the IUB must have sufficient technical staff trained in		
Department Director Signature: Straubs Squil Date: 5-20-1			
Department Director Printed Name: 2020 St. S. CODS	<u>S</u>		
Additional information to assist you in completing this for See Fact Sheet for more complete information.  This waiver is required by HF45 from March 7 until June 30, 2011.  If no overnight stay is required at a location out-of-state, the travel is incidental and no waiver form needs to be submitted.  The Council meets each Monday at 10:00 a.m. Deadline for waiver Wednesday at 12:00 noon.	Email a PDF of the form to  executivecouncit@iowa.gov  Council Approval  APPROVED  Executive Council		
<ul> <li>If your travel requires both Executive Council approval and the waive due to a convention/conference, note that both processes must be of</li> </ul>	ver justification MAY 3 1 2011		

## **Out-Of-State Travel Waiver Justification**

This waiver justification is to be completed for every out-of-state trip requested between March 7 and June 30, 2011.

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See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

	Please answer all of the	questions listed below.	
Number of People on Trip:	2	Contact E-mail:	MELISSA.SPEED@DNR.IOWA.GOV
Name of Person Attending:	Peter Zayudis	Working Title: Env	ironmental Engineer
Department: Department or	Natural resources	Division/Bureau/Sec	tion: ESD, AQB, Construction Permits
Will this trip require an over	night stay outside of lowa? No: 🗌 Yes:	(If No, you do not need	this waiver)
City (Cities) Traveling To:	Kansas City, MO	Dates of Travel: 04-	
		(If after June 30, 2011	! – you DO NOT need this waiver.)
Funding Source: Appr	opriated State:%	Other: 100% If Other ation 0000 - you DO NOT need	er, Specify: Title V Fees ed this waiver.)
Total Projected Cost of Trip	(Include Transportation, Mileage, Lodging,		
	cutive Council Approval for Conference/Con		
If Yes, Have You Received A			
Reason for Travel Waiver (S			
	ired duties. (Cite the specific statute.)	14	
Use notestial to bring	cost savings or enhanced revenues to the s	state. (Cite the specific	
program that will recei	ive the cost savings or enhanced revenues a ues attributable to the travel.)	and provide an estimate	
current Executive Couthe line below. (If non The Carb #246 Aggregate, C #246 Aggregate, Concrete B process applications in a more gulation and training of this	atch, and Hot Mix Asphalt Plant located in Kans re efficient and timely manner. The state of low nature will allow better understanding and pro- ral regulations that govern these operations hava anges. This training opportunity allows me to b	rovide that information on f purchase is required.) ing is not funded by general funded by the services applications from the Against the Carlos been modified and the Carlos from the Carlos funded by the carlos from the Carlos funded by the Carlos fu	gregate. Concrete Batch and Hot Mix Asphalt
		7	4
Department Director Signa	ture: And June	Date: 5	25-11
Department Director Printe	d Name: ROGER LANDE		
This form must b	e signed by a department head or agency di	irector. Email a PDF of the	form to executivecouncil@jowa.gov
			Executive Council Approval
Additional	information to assist you in completin Fact Sheet for more complete informa	ation.	Executive Council Approval APPROVED
This waiver is requi	red by HF45 from March 7 until June 30,	2011.	Executive Council
<ul> <li>If no overnight stay</li> </ul>	is required at a location out-of-state, the	travel is considered	MAY 3 1 2011
incidental and no w	aiver form needs to be submitted. each Monday at 10:00 a.m. Deadline for	r waiver is the previous	
The Council meets Thursday at 12:00 r	loon.		

Page 1 of 1

If your travel requires both Executive Council approval and the waiver justification due to a convention/conference, note that both processes must be completed

## **Out-Of-State Travel Waiver Justification**

This waiver justification is to be completed for every out-of-state trip requested between March 7 and June 30, 2011.

If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

	Please answer all of the qu	estions listed below	,
Number of People on Trip:	2	Contact E-mail:	MELISSA.SPEED@DNR.IOWA.GOV
Name of Person Attending:	Michael Hermsen	Working Title:	Environmental Engineer
Department: Department of	Natural Resources	Division/Bureau/	Section: ESD, AQB, Construction Permits
Will this trip require an over	night stay outside of lowa? No: 🗌 Yes: 🖂	(If No, you do not n	eed this waiver)
City (Cities) Traveling To:	Kansas City, MO		04/26/11 to 04/28/11
		(If after June 30, 2	011 – you DO NOT need this waiver.)
Funding Source: Appr	opriated State:%	Other: 100% If 0 on 0000 - you DO NOT	Other, Specify: Title V Fees need this waiver.)
Total Projected Cost of Trip	(Include Transportation, Mileage, Lodging, Me	eals, Registration, Par	king, etc): \$200
Does this Trip Require Exec	utive Council Approval for Conference/Conve	ntion? No: 🛛 Ye	es: 🗌
If Yes, Have You Received A	Approval? No: Yes: If Yes, Da	te:	
Reason for Travel Waiver (S	elect one) ired duties. (Cite the specific statute.)	0	
program that will recei of the saving or revenu  Has a benefit or poten	cost savings or enhanced revenues to the star ve the cost savings or enhanced revenues an ues attributable to the travel.) tial benefit which significantly outweighs the noil Fact Sheet for qualifying criteria and prov	d provide an estimate potential cost. See the ride that information o	
The Carb #246 Aggregate, Coursel Barrocess applications in a mor regulation and training of this industries. In addition, Federal	atch, and Hot Mix Asphalt Plant located in Kansas e efficient and timely manner. The state of lowal nature will allow better understanding and proces al regulations that govern these operations have inges. This training opportunity allows me to bette	is not funded by generations, MO serves has a has over 200 to 300 places applications from the been modified and the	Aggregate: Concrete Batch and Hot Mix Asphalt
Department Director Signal	ture: // / ////	Date:	25-
Department Director Printe	d Name: ROGER LANDE e signed by a department head or agency direct	otor Email a PDE of t	he form to executivecouncil@iowa.gov
This form must be	signed by a department nead of agency unco	Non. Eman a 7 D. G. a	
Additional	information to assist you in completing Fact Sheet for more complete information	this form.	Executive Council Approval
<ul> <li>This waiver is require</li> </ul>	ed by HF45 from March 7 until June 30, 20	011.	
<ul> <li>If no overnight stay in</li> </ul>	s required at a location out-of-state, the tra	vel is considered	APPROVED Executive Council
The Council meets of	aiver form needs to be submitted. each Monday at 10:00 a.m. Deadline for w	aiver is the previous	
Thursday at 12:00 n	oon. s both Executive Council approval and the	waiver justification	MIAI 31 ZUII
due to a convention.	/conference, note that both processes mus	t be completed	

# Out-Of-State Travel Waiver Justification

This waiver justification is to be completed for every out-of-state trip requested between March 7 and June 30, 2011.

If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

1 10000 00000	
Number of People on Trip: One	
Name of Person Attending: Dr. Ann Touney	Working Title: Staff Physician
Department: lowa Veterans Home	Division/Bureau/Section: Veterans Affairs
Will this trip require an overnight stay outside of lowa? No: 🗌 Yes: 🦳	(If No, you do not need this waiver)
City (Cities) Traveling To: Schaumburg, Illinois	Dates of Travel: 6/4/11 – 6/11/11
Funding Source: Appropriated State: 12% Federal: 26% Clifthe appropriated state funds are 0% -	Other: 62% If Other, Specify: Self Generated Funds you do not need this waiver)
Total Projected Cost of Trip (Include Transportation, Mileage, Lodging, Meals	s, Registration, Parking, etc): 2826.52
Does this Trip Require Executive Council Approval for Conference/Convention	
If Yes, Have You Received Approval? No: Yes: If Yes, Date: Reason for Travel Waiver (Select one)	· · · · · · · · · · · · · · · · · · ·
Fulfills statutorily required duties (Cite the specific statute)	
Has potential to bring cost savings or enhanced revenues to the state ( program that will receive the cost savings or enhanced revenues and p of the saving or revenues attributable to the travel)	MONING BIL German
Has a benefit or potential benefit which significantly outwelghs the potential the current Executive Council Fact Sheet for qualifying criteria and proinformation on the lines below.	vide that
This Course will provide a review and updates on current knowledge and practice	recommendations for Internal Medicine. In Dr. Touney's work
at the lowa Veterans Home this Information will aid in the care of our residents an	d will be shared with the other needcal stall.
Department Director Signature  This form must be signed by a department head or agency director	
	Executive Council Approval
Additional information to assist you in completing this See Fact Sheet for more complete information.  This waiver is required by HF45 from March 7 until June 30, 2011. If no overnight stay is required at a location out-of-state, the travel incidental and no waiver form needs to be submitted.  The Council meets each Monday at 10:00 a.m. Deadline for waive Thursday at 12:00 noon.  If your travel requires both Executive Council approval and the waid due to a convention/conference, note that both processes must be	is considered Executive Council  MAY 3 1 2011  Iver justification

## **Out-Of-State Travel Waiver Justification**

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See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

	**************************************		The second and device and
Number of People on Trip:	1		Theresa.stiner@dnr.iowa.gov
Name of Person Attending:	Theresa Stiner	Working Title:	Environmental Specialist Senior
Department: Natural Resou	irces	Division/Bureau	//Section: Environmental Protection/LQB/SW
Will this trip require an over	night stay outside of lowa? No: Yes: X	(If No, you do not	need this waiver)
City (Cities) Traveling To:	Atlanta GA	Annual Control	: June 27-28, 2011
	(If the coding for the travel claim is appropriation	Other: 100% If on 0000 - you DO NO	
	(Include Transportation, Mileage, Lodging, Me		
Does this Trip Require Exec	cutive Council Approval for Conference/Conve	ntion? No: X Y	∕es: □
If Yes, Have You Received A	Approval? No: Yes: If Yes, Date	te:	
X program that will receip of the saving or revenue.  Has a benefit or potent current Executive Couthe lines below. (If not	ired duties. (Cite the specific statute.)  cost savings or enhanced revenues to the stature the cost savings or enhanced revenues and use attributable to the travel.)  tial benefit which significantly outweighs the puncil Fact Sheet for qualifying criteria and provonrefundable ticket is the justification, date of puncil Fact Sheet for qualifying criteria and provonrefundable ticket is the justification, date of puncing the puncil Fact Sheet for qualifying criteria and provonrefundable ticket is the justification.	d provide an estimat potential cost. See the ride that information purchase is required.	See attached he on
Department Director Printe	d Name: Roger Lande		
			Executive Council Approval
This waiver is require     If no overnight stay is incidental and no wa     The Council meets e     Wednesday at 12:00	aformation to assist you in completing the fact Sheet for more complete information and by HF45 from March 7 until June 30, 20% required at a location out-of-state, the travitiver form needs to be submitted. Each Monday at 10:00 a.m. Deadline for wall noon.  In both Executive Council approval and the vertical states are provided in the submitted and th	n. 11. vel is considered aiver is the previous	MICT O I COLL

due to a convention/conference, note that both processes must be completed

## **Out-Of-State Travel Waiver Justification**

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If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

Number of People on Trip: 1	
Name of Person Attending: Kathleen Beebout	Working Title: Health Professional Investigator
D. F. HW.	Division/Bureau/Section: Nursing Board
Department: Public Health	
Will this trip require an overnight stay outside of lowa? No: ☐ Yes: ☒	(If No, you do not need this waiver)
City (Cities) Traveling To: Chicago, IL	Dates of Travel: April 3, 2011 – April 5, 2011
Funding Source: Appropriated State:%	Other: 100% If Other, Specify: NCSBN Reimbursement you do not need this waiver)
Total Projected Cost of Trip (Include Transportation, Mileage, Lodging, Meals	, Registration, Parking, etc): \$1356.72
Does this Trip Require Executive Council Approval for Conference/Convention	on? No: 🛛 Yes: 🗌
If Yes, Have You Received Approval? No: Yes: If Yes, Date: Reason for Travel Waiver (Select one)	
Fulfills statutorily required duties (Cite the specific statute)	
Has potential to bring cost savings or enhanced revenues to the state (Comprogram that will receive the cost savings or enhanced revenues and proof the saving or revenues attributable to the travel)  Has a benefit or potential benefit which significantly outweighs the potential the current Executive Council Fact Sheet for qualifying criteria and provinformation on the lines below.	ential cost. See
lowa utilizes the outcome of this committee to access, develop and promote best	practices to licensure and regulatory laws and rules that are uniform
among states.	
Department Director Signature  Mariannette Miller-Meeks, MD  This form must be signed by a department head or agency director.	,
	Executive Council Approval
Additional information to assist you in completing this See Fact Sheet for more complete information.  This waiver is required by HF45 from March 7 until June 30, 2011. If no overnight stay is required at a location out-of-state, the travel incidental and no waiver form needs to be submitted.  The Council meets each Monday at 10:00 a.m. Deadline for waive Thursday at 12:00 noon.  If your travel requires both Executive Council approval and the wairdue to a convention/conference, note that both processes must be separately. See Fact Sheet for further explanation.	is considered  APPROVED Executive Council  MAY 3 1 2011  ver justification

### **Out-Of-State Travel Waiver Justification**

This waiver justification is to be completed for every out-of-state trip requested between March 7 and June 30, 2011.

If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

7 10000 0.101101 111 111 111	
Number of People on Trip: 1 C	ontact E-mail: melanie.rasmusson@idph.iowa.gov
Name of Person Attending: Melanie Rasmusson	Vorking Title: Bureau Chief
Department: Iowa Department of Public Health	ivision/Bureau/Section: EH/RAD Health/Radioactive Materials
Will this trip require an overnight stay outside of lowa? No: ☐ Yes: X (If N	lo, you do not need this waiver)
	Dates of Travel: Mar 14 -16, 2011 If after June 30, 2011 – you DO NOT need this waiver.)
Funding Source: Appropriated State:%	100% If Other, Specify: Romined fels
Total Projected Cost of Trip (Include Transportation, Mileage, Lodging, Meals, F	Registration, Parking, etc): \$499.87
Does this Trip Require Executive Council Approval for Conference/Convention	
	February 14, 2011
ii 165, ilave Tou Nooditou / pp	
Reason for Travel Waiver (Select one)  Fulfills statutorily required duties. (Cite the specific statute.)	
Has potential to bring cost savings or enhanced revenues to the state. (Ci program that will receive the cost savings or enhanced revenues and profof the saving or revenues attributable to the travel.)  X Has a benefit or potential benefit which significantly outweighs the potent current Executive Council Fact Sheet for qualifying criteria and provide the	tial cost. See the
the lines below. (If nonrefundable ticket is the justification, date of purch	ase is required.)
Update of current regulations regarding the radiological response and to refine Conference is job related and needed for lowa to remain at the front of inciden	t management of radiological events.
Department Director Signature:  Mariannette Miller-Meeks, MD  This form must be signed by a department head or agency director.	Date: 5/24/11  Email a PDF of the form to executivecouncil@iowa.gov
	Executive Council Approval
Additional information to assist you in completing this for See Fact Sheet for more complete information.  This waiver is required by HF45 from March 7 until June 30, 2011.  If no overnight stay is required at a location out-of-state, the travel is incidental and no waiver form needs to be submitted.  The Council meets each Monday at 10:00 a.m. Deadline for waiver Wednesday at 12:00 noon.  If your travel requires both Executive Council approval and the waived the processes must be convention/conference, note that both processes must be convention/conference.	considered  APPROVED Executive Council  MAY 3 1 2011  er justification

#### **Out-Of-State Travel Waiver Justification**

This waiver justification is to be completed for every out-of-state trip requested between March 7 and June 30, 2011.

If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

Number of People on Trip: 4		
Name of Person Attending: Jonathan Degen	Working Title: Trooper Pilot	
Department: 595-Public Safety	Division/Bureau/Section: lowa State Patrol	
Will this trip require an overnight stay outside of Iowa? No: ☐ Yes: ☒	(If No, you do not need this waiver)	
City (Cities) Traveling To: Sanford and Raleigh, NC	Dates of Travel: May 30, 2011-June 1, 2011	
Funding Source: Appropriated State: 100% Federal: Other: Media of the appropriated state funds are 0% - you do not need this waiver)		
Total Projected Cost of Trip (Include Transportation, Mileage, Lodging, Meals, Registration, Parking, etc): \$1744.00		
Does this Trip Require Executive Council Approval for Conference/Convention? No: ⊠ Yes: □		
If Yes, Have You Received Approval? No: ☐ Yes: ☒ If Yes, Date:  Reason for Travel Waiver (Select one)		
☐ Fulfills statutorily required duties (Cite the specific statute)		
Has potential to bring cost savings or enhanced revenues to the state (Cite the specific program that will receive the cost savings or enhanced revenues and provide an estimate of the saving or revenues attributable to the travel)		
Has a benefit or potential benefit which significantly outwelghs the potential cost. See  the current Executive Council Fact Sheet for qualifying criteria and provide that Information on the lines below.		
Four Trooper Pilots will be flying two aircraft to North Carolina to have FLIR units installed. FLIR is very useful in searching for lost children		
and dementia patients in darkness and areas where it is difficult to search. Fi		
apprehension. This flight is over mountains and is unsafe with one pilot per p	plane. The ISP does not have an aircraft available to transport	
four pilots back to lowa.		
Department Director Signature	Date:	
This form must be signed by a department head or agency director.	Email a PDF of the form to executivecouncil@iowa.gov	

#### Additional information to assist you in completing this form. See Fact Sheet for more complete information.

- This waiver is required by HF45 from March 7 until June 30, 2011.
- If no overnight stay is required at a location out-of-state, the travel is considered incidental and no waiver form needs to be submitted.
- The Council meets each Monday at 10:00 a.m. Deadline for waiver is the previous Thursday at 12:00 noon.
- If your travel requires both Executive Council approval and the waiver justification due to a convention/conference, note that both processes must be completed separately. See Fact Sheet for further explanation.

**Executive Council Approval** 

APPROVED Executive Council

#### **Out-Of-State Travel Waiver Justification**

This waiver justification is to be completed for every out-of-state trip requested between March 7 and June 30, 2011.

If more than one employee is traveling, a separate form must be completed for each person.

See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

Number of People on Trip: 4		
	Working Title: Trooper Pilot	
Name of Person Attending: Michael Current	Working Title. 1100per Filot	
Department: 595-Public Safety	Division/Bureau/Section: Iowa State Patrol	
Will this trip require an overnight stay outside of lowa? No: ☐ Yes: ⊠	(If No, you do not need this walver)	
City (Citles) Traveling To: Sanford and Raleigh, NC		
Funding Source: Appropriated State: 100% Federal: Other: Media of the appropriated state funds are 0% - you do not need this waiver)		
Total Projected Cost of Trip (Include Transportation, Mileage, Lodging, Meals	s, Registration, Parking, etc): \$1744.00	
Does this Trip Require Executive Council Approval for Conference/Convention? No: 🖂 Yes: 🗌		
If Yes, Have You Received Approval? No: ☐ Yes: ☒ If Yes, Date:		
Reason for Travel Walver (Select one)		
☐ Fulfills statutorily required duties (Cite the specific statute)		
Has potential to bring cost savings or enhanced revenues to the state (Cite the specific program that will receive the cost savings or enhanced revenues and provide an estimate of the saving or revenues attributable to the travel)		
Has a benefit or potential benefit which significantly outwelghs the potential cost. See  the current Executive Council Fact Sheet for qualifying criteria and provide that information on the lines below.		
Four Trooper Pilots will be flying two aircraft to North Carolina to have FLIR	units installed. FLIR is very useful in searching for lost children	
and dementia patients in darkness and areas where it is difficult to search. F	FLIR has also been demonstrated to be successful in criminal	
apprehension. This flight is over mountains and is unsafe with one pilot per	plane. The ISP does not have an aircraft available to transport	
four pilots back to lowa.	7 7	
Department Director Signature	Date: 3/25/c/	
This form must be signed by a department head or agency director.	Email a PDF of the form to executivecouncil@iowa.gov	

Additional information to assist you in completing this form. See Fact Sheet for more complete information.

- This waiver is required by HF45 from March 7 until June 30, 2011.
- If no overnight stay is required at a location out-of-state, the travel is considered incidental and no waiver form needs to be submitted.
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**Executive Council Approval** 

APPROVED Executive Council

#### **Out-Of-State Travel Waiver Justification**

This waiver justification is to be completed for every out-of-state trip requested between March 7 and June 30, 2011. If more than one employee is traveling, a separate form must be completed for each person. See the Executive Council Waiver for Out of State Travel Fact Sheet for details.

Please answer all of the questions listed below.

Number of People on Trip: 4	
Name of Person Attending: Brian Bartels	Working Title: Trooper Pilot
Department: 595-Public Safety	Division/Bureau/Section: Iowa State Patrol
Will this trip require an overnight stay outside of lowa? No: ☐ Yes: ⊠	(If No, you do not need this waiver)
City (Cities) Traveling To: Sanford and Raleigh, NC	Dates of Travel: May 30, 2011-June 1, 2011
Funding Source: Appropriated State: 100% Federal: (If the appropriated state funds are 0% -	Other:% If Other, Specify:
Total Projected Cost of Trip (Include Transportation, Mileage, Lodging, Meals	, Registration, Parking, etc): \$1744.00
Does this Trip Require Executive Council Approval for Conference/Convention	on? No: ⊠ Yes: □
If Yes, Have You Received Approval? No: ☐ Yes: ☒ If Yes, Date: Reason for Travel Waiver (Select one)	
☐ Fulfills statutorily required duties (Cite the specific statute)	
Has potential to bring cost savings or enhanced revenues to the state (C program that will receive the cost savings or enhanced revenues and proof the saving or revenues attributable to the travel)	ovide an estimate
Has a benefit or potential benefit which significantly outweighs the potential the current Executive Council Fact Sheet for qualifying criteria and provinformation on the lines below.	ntial cost. See ide that
Four Trooper Pilots will be flying two aircraft to North Carolina to have FLIR u	inits installed. FLIR is very useful in searching for lost children
and dementia patients in darkness and areas where it is difficult to search. F	LIR has also been demonstrated to be successful in criminal
apprehension. This flight is over mountains and is unsafe with one pilot per	plane. The ISP does not have an aircraft available to transport
four pilots back to lowa.	
Department Director Signature	Date: 5/25/11
This form must be signed by a department head or agency director.	Email a PDF of the form to executivecouncil@iowa.gov
	Executive Council Approval
Additional information to assist you in completing this f	

See Fact Sheet for more complete information.

- This waiver is required by HF45 from March 7 until June 30, 2011.
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APPROVED **Executive Council** 

#### **Out-Of-State Travel Waiver Justification**

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Please answer all of the questions listed below.

Number of People on Trip: 4		
Name of Person Attending: Scott Pigsley	Working Title: Trooper Pilot	
Department: 595-Public Safety	Division/Bureau/Section: lowa State Patrol	
Will this trip require an overnight stay outside of Iowa? No: ☐ Yes: ⊠	(If No, you do not need this waiver)	
City (Cities) Traveling To: Sanford and Raleigh, NC	Dates of Travel: May 30, 2011-June 1, 2011	
Funding Source: Appropriated State: 100%  Federal: (If the appropriated state funds are 0% -	Other:% If Other, Specify: you do not need this waiver)	
Total Projected Cost of Trip (Include Transportation, Mileage, Lodging, Meals	, Registration, Parking, etc): \$1744.00	
Does this Trip Require Executive Council Approval for Conference/Convention? No: ⊠ Yes: □		
If Yes, Have You Received Approval? No: ☐ Yes: ☑ If Yes, Date:  Reason for Travel Walver (Select one)		
Fulfills statutorily required duties (Cite the specific statute)		
Has potential to bring cost savings or enhanced revenues to the state (Cite the specific program that will receive the cost savings or enhanced revenues and provide an estimate of the saving or revenues attributable to the travel)		
Has a benefit or potential benefit which significantly outweighs the potential cost. See  the current Executive Council Fact Sheet for qualifying criteria and provide that information on the lines below.		
Four Trooper Pilots will be flying two aircraft to North Carolina to have FLIR to	mits installed. FLIR is very useful in searching for lost children	
and dementia patients in darkness and areas where it is difficult to search. F	LIR has also been demonstrated to be successful in criminal	
apprehension. This flight is over mountains and is unsafe with one pilot per	plane. The ISP does not have an aircraft available to transport	
four pilots back to lowa.		
Department Director Signature	Date: 5/25/11	
This form must be signed by a department head or agency director.	Email a PDF of the form to executivecouncil@lowa.gov	

Additional information to assist you in completing this form. See Fact Sheet for more complete information.

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**Executive Council Approval** 

**APPROVED Executive Council**